

FILED ENTERED	RECEIVED SERVED ON COUNSEL/PARTIES OF RECORD
OCT - 3 2018	
CLERK US DISTRICT COURT DISTRICT OF NEVADA	
BY: _____	DEPUTY _____

Shannon Carter # 70773  
P.O. Box 650  
Indian Springs NV. 89070

Pro-se

UNITED STATES DISTRICT COURT  
DISTRICT OF NEVADA

Shannon Carter, Case No 2:17-CV-01628-RFB-GWF  
Plaintiff  
DECLARATION IN SUPPORT OF PLAINTIFF'S  
Vs. MOTION FOR SUMMARY JUDGMENT  
(PARTIAL)

S. Bean et al....  
Defendants

Shannon Carter, states

I am the Plaintiff in this case. The Complaint alleges Deliberate and Indifferents to Plaintiffs Serious medical needs by delaying, denying and directly interfering with perscribed treatment on 2/1/17 by directly denying Plaintiff medical treatment by defendants S. Bean and Dr. Bitar and by Supporting, Implementing, enforcing and ratifying arbitrary "Customs" and Policies inwhich allows such acts by the remaining defendants Resulting in denial of medical treatment and Plaintiff being Subjected, to "UNNECESSARY WANTON INFLICTION OF PAIN" in Violation of Plaintiffs 8<sup>th</sup> amendment Rights to the U.S. Constitution. I Submit this declaration In Support of my motion for partial Summary Judgment on my claim of Deliberate and Indifferent to Plaintiffs Serious medical needs (I have not moved for Summary Judgment on remaining claims Due to Plaintiff is Pro-se First time filing Summary Judgment motion believes there may be material factual disputes concerning them.)

2. I am an inmate at High Desert State Prison herein, (H.D.S.P.)  
 on 2/1/17 I was placed on dental sick call list for scheduled follow  
 up treatment pertaining to infected teeth left in Plaintiff's mouth  
 for around 10 months at that time, prescribed by defendant Dr.  
 Mangapit see Attachment (A) OPPOSITION TO (TRO) EXHIBIT (2)  
 Defendant Scherrie Beans Declaration Paragraphs (7) through (11)

3. on 2/1/17 Plaintiff was scared to medical as stated in  
 Plaintiff's "Verified" Complaint and was told to Drop his law suit against  
 the defendants or he would not be treated by defendants S. Bean and  
 Dr. Bitar see "Verified" Amended complaint on file.

4. The law suit in question was case No. A-16-747779-C  
 filed a month or so before Plaintiff's Prescribed Scheduled  
 treatment on 2/1/17 Pertaining Specifically to the Deliberate  
 and Indifferent actions of (H.D.S.P.) dental program Delaying  
 and refusing treatment to known infected teeth see Case No.  
 A-16-747779-C also Attachment (A) OPPOSITION TO (TRO)

5. Ultimately Plaintiff was not treated on 2/1/17 or  
 any time after for that matter despite the defendants knowing  
 (1) Plaintiff had a Serious medical need in which warranted treatment  
 (2) They had fail, delayed, interfered and refused to treat  
 said Serious medical need.  
 (3) Plaintiff had Suffered and still to this day is Suffering  
 from Actual Injury Due solely to delay and refusal of medical  
 treatment by (H.D.S.P.) Dental program See Attachment (A)  
 and (B) TRO OPB. and Grievances

6. There after Plaintiff filed a Grievance informing NDOC/HDSP of the Retaliation and Refusal of medical treatment to a on going and continuing Violation of denial of medical along with the EXcruciating Pain Plaintiff was still in. See Attachment (C) Improper Grievance memo

7. HDSP/NDOC then improperly rejected Plaintiffs Grievance and Never Forwarded it to [REDACTED] medical nor, Placed Plaintiff on dental Sick call list to be treated.

8. Plaintiff then filed a TRO in case A-16-747779-C Informing the courts and again the defendants of his want and need of medical treatment see. Attachment (D) TRO memorandum and Rest of TRO on File

9. A TRO hearing was held defendant Dr. Bitar testified Plaintiff was at dental on 2/1/17 but was not treated stating Plaintiff said he had already been treated and only wanted names for his law suit. See TRO Hearing trans. on File Plaintiff has requested these records from district court to be Avail

10 At the hearing Plaintiff asked Dr. Bitar why then didn't Dr. Bitar have Plaintiff sign a Doc-2523 Form as required by NDOC/HDSP Policies and Procedures. Dr. Bitar stated Plaintiff Never refused treatment and he never had Plaintiff medical chart "couldn't find it" Nor, was he aware of any lawsuit further Plaintiffs last Kite to dental was a request for names. Going Places see TRO Hearing Trans. also Attachment (E) Release of liability form Doc-2523 also see Attachment (F) Paul Bitar Declaration

11. Ultimately district court was ~~Incline~~ to believe Dr. Bitar That Plaintiff did not seek treatment and there was no indifference despite plaintiff stating and pleading to the court the defendants will not treat him District court DENIED TRO see Attachment (G) court minutes

12. District Court then ensured Plaintiff once back at H DSP Plaintiff would be treated see. trans TRO Hearing on file

13. Three days after court hearing Plaintiff informed the head warden of what was going on and the Pain and need for treatment 7/16/17 see Attachment (H) Kite to warden and/or defendant B. Williams

14. Defendant Dr. Bitar and S. Bean Stated Plaintiff was not treated on 2/1/17 <sup>Due to</sup> Never requested treatment only names, despite both their Declarations stating I was there specifically for scheduled treatment see Attachment (A), (F) moreover, defendant S. Bean was served a summons and complaint informing dental of the want and need of treatment to infected tooth left in Plaintiff's mouth on 1/31/17 the day before Plaintiff's scheduled treatment on 2/1/17 see. Attachment (I) AFFIDAVIT OF SERVICE

15. Further Dr Bitar Stated he never had Plaintiff medical chart to know if Plaintiff still need treatment what the defendants are failing to understand is the fact The head Dentist had No knowledge of where Plaintiff's medical chart was on a scheduled appointment not aware of lawsuits of untreated Pain on 2/1/17 along with once determining Plaintiff was there for treatment Schedule by dental chose not to have Plaintiff put back on dental list to treat or have Plaintiff sign refusal. Nowing Plaintiff was requesting treatment Via Grievance, TRO, Kites to wardens and dental was and is Deliberate and Indifferent to Plaintiff's serious medical needs

16. Even if this court was to be inclined to believe some how (HDSP) Head of Dental department dispoit Multiple Kites Grievances and 1783 civil complaint and scheduled follow-up care treatment had "No" knowledge of Plaintiffs want and need of treatment on 2/1/17.

17. NDOC/HDSP and All named defendants new of Plaintiffs need and want of medical treatment and the fact Plaintiff was not treated for known Schedule perscribed treatment on 2/1/17 on the following dates Thereafter, Yet Still Choice not to treat Plaintiff:

4/6/17 Grievance see Attachment (C)

4/7/17 AFFIDAVIT<sup>(x2)</sup> see Attachment (J)

4/21/17 Proof of Servic<sup>inc</sup> Attachment (K)

6/12/17 Filed TRO motion See Attachment (D)

7/7/17 TRO oppo. see Attachment (A)

7/13/17 TRO Hearing see Trans on Record

7/16/17 Kite to Warden see Attachment (H)

2/1/17 After Appt. Dr Bitar found medical chart know plaintiff needed treatment

see Attachment (A) Exhibit (1) medical intrc. 2/1/17

18. For the reasons stated in the brief submitted with this motion, These undisputed facts establish that the named defendants in the instant Complaint was and is Deliberate and Indifferent to Plaintiffs serious medical needs. Accordingly, I am entitled to Summary Judgment on my 8<sup>th</sup> amendment Deliberate and Indifferent to Serious medical needs claim.

Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing, is true and correct.

Dated this 1<sup>st</sup> day of October, 2018

Sharon Carter

Attachment (A)

(A)

Attachment (A)

1 **OPP**

2 ADAM PAUL LAXALT  
3 Nevada Attorney General  
4 BARRACK T POTTER (Bar No. 14105)  
5 Deputy Attorney General  
6 State of Nevada  
7 Office of the Attorney General  
8 555 E. Washington Avenue, Ste. 3900  
9 Las Vegas, NV 89101  
10 Telephone: (702) 486-3125  
11 Facsimile: (702) 486-3773  
12 E-Mail: bpotter@ag.nv.gov

13 *Attorneys for Defendants*

14 **DISTRICT COURT**  
15 **CLARK COUNTY, NEVADA**

16 SHANNON CARTER,

17 Plaintiff,

18 v.

19 JOHN DOE HDSP DENTIST, et al.,

20 Defendants.

Case No. A-16-747779-C  
Dept. No. II

21 **DEFENDANTS' AMENDED OPPOSITION TO PLAINTIFF'S MOTION FOR**  
22 **TEMPORARY RESTRAINING ORDER AND PRELIMINARY INJUNCTION**

23 Defendants, State of Nevada, ex rel. Nevada Department of Corrections, James  
24 Dzurenda, Scherrie Bean, and Ronrico Mangapit, by and through counsel, Adam Paul  
25 Laxalt, Nevada Attorney General, and Barrack T Potter, Deputy Attorney General,  
26 hereby submit their Opposition to Plaintiff's Motion for Temporary Restraining Order  
27 and Preliminary Injunction. This Opposition is based upon the following Memorandum of  
28 Points and Authorities and all papers and pleadings on file herein.

DATED this 7th day of July, 2017.

ADAM PAUL LAXALT  
Attorney General

By: /s/ Barrack T Potter  
BARRACK T POTTER (Bar No. 14105)  
Deputy Attorney General

*Attorneys for Defendants*

## I. BACKGROUND

Plaintiff, Shannon Carter (Plaintiff), is an inmate currently housed at High Desert State Prison (HDSP). Plaintiff asserts one cause of action in his Amended Complaint against the Defendants for deliberate indifference to serious medical needs under the Eighth Amendment. Am. Compl. at 4. Plaintiff alleges that Defendants Bean and Mangapit were deliberately indifferent to his serious medical needs for “delaying treatment to (3) effect [sic] teeth[,] [F]or [one] over 117 days[,] the [second] over 150 and the thired [sic] tooth has still to this day has [sic] not been addressed.” *Id.* at 2. Plaintiff claims that Defendant Dzurenda was deliberate and indifferent by failing to address the inadequate dental procedure at HDSP, which he was aware of or should have been aware of. *Id.*

On June 12, 2017, Plaintiff filed a Motion for Temporary Restraining Order and Preliminary Injunction. Plaintiff also filed a declaration in support of that motion on the same day. Plaintiff failed to serve either document on the Office of the Attorney General, the Nevada Department of Corrections (NDOC), or any of the defendants, which is reflected in the Certificate of Service for each document.

## II. LEGAL STANDARD

“A party seeking the issuance of a preliminary injunction bears the burden of establishing (1) a likelihood of success on the merits; and (2) a reasonable probability that the non-moving party's conduct, if allowed to continue, will cause irreparable harm for which compensatory damage is an inadequate remedy.” *S.O.C., Inc. v. Mirage Casino-Hotel*, 117 Nev. 403, 408, 23 P.3d 243, 246 (2001); *see also* NRS 33.010. “The decision whether to grant a preliminary injunction is within the sound discretion of the district court, whose decision will not be disturbed on appeal absent an abuse of discretion.” *Dangberg Holdings Nevada, L.L.C. v. Douglas County & its Bd. of County Com'rs*, 115 Nev. 129, 142–43, 978 P.2d 311, 319 (1999). “[A]n injunction will not issue to restrain an act which does not give rise to a cause of action.” *State Farm Mut. Auto. Ins. Co. v. Jafbro Inc.*, 109 Nev. 926, 928, 860 P.2d 176, 178 (1993) (internal quotation marks



omitted). "No preliminary injunction shall be issued without notice to the adverse party."  
 NRCP 65 (a)(1).

### III. LEGAL ARGUMENT

#### A. Plaintiff is Making Misrepresentations to the Court and Fails to Meet Either Prong of the Preliminary Injunction Standard

Plaintiff claims that he has been "denied adequate medical care while housed at H.D.S.P. resulting in Parmant [sic] damage to my teeth, bleeding gum, unable to eat[,], sleep and unnecessary wanton infliction of Pain." See Declaration in Support of Plaintiff[s] Motion for Temporary Restraining Order and Preliminary Injunction, at ¶2. Plaintiff further alleges that he is being "outright denied dental care." *Id.* at ¶3. Additionally, Plaintiff alleges that it "would be unrealistick [sic] for Plaintiff to willingly go under the knife of the defendants after being denied [dental treatment] for over a year and the retaliation on February 2, 2017." *Id.* at ¶6.

Here, Dr. Bitar saw Plaintiff on February 1, 2017; however, Plaintiff stated he did not have any current dental treatment needs, but wanted to get the names of dental assistants and providers to use in his litigation. See Shannon Carter's Dental Chart, attached hereto as **Exhibit 1**; see also Declaration of Scherrie Bean, attached hereto as **Exhibit 2**. Plaintiff also submitted an Inmate Request Form (kite) on January 6, 2017, seeking the names of dental staff for his civil lawsuit. See Inmate Request Forms, attached hereto as **Exhibit 3**.

"According to his dental chart, Plaintiff was seen on three separate occasions for treatment in 2016." See Exhibit 2 at ¶6. "Dr. Mangapit completed Plaintiff's first filling on June 16, 2016 and Plaintiff was scheduled for another appointment to address another tooth that Plaintiff was having issues with." *Id.* at ¶9. "Plaintiff was then scheduled for another filling, which was completed by Dr. Mangapit on September 1, 2016." *Id.* at ¶10. "Plaintiff was then scheduled for more treatment on October 6, 2016; however, Plaintiff was rescheduled to February 1, 2017 due to an emergency recall by the prison." *Id.* at ¶11. Plaintiff was seen by Dr. Bitar and Defendant Bean on February 1, 2017. *Id.* at

¶12. At that appointment, "Plaintiff claimed that all of his dental treatment had already been completed...." *Id.* at ¶14. "Plaintiff claimed that he did not want to be seen for treatment, but instead wanted the names of the dental assistants for his civil lawsuit." *Id.* at ¶15; *see also* Exhibit 1.

Plaintiff fails to meet his "burden of establishing (1) a likelihood of success on the merits; and (2) a reasonable probability that the non-moving party's conduct, if allowed to continue, will cause irreparable harm for which compensatory damage is an inadequate remedy." *S.O.C., Inc.*, 117 Nev. at 408, 23 P.3d at 246. Plaintiff argues that he still has a tooth that has not been treated; however, Plaintiff was called to dental on February 1, 2017 and claimed he did not need any medical care. *See* Exhibit 1; *see also* Exhibit 2. Additionally, any further significant injury or unnecessary pain to Plaintiff is directly caused by his own refusal of treatment offered by Defendants. Defendants did not disregard any significant risk to Plaintiff's health or safety because they responded in a reasonable manner to Plaintiff's dental needs and offered acceptable dental treatment, which Plaintiff declined. Plaintiff fails to meet either prong of the *S.O.C., Inc.* test. Therefore, Plaintiff's Motion for Temporary Restraining Order and Preliminary Injunction must be denied.

#### IV. CONCLUSION

Defendants respectfully request this Court deny Plaintiff's Motion for Temporary Restraining Order and Preliminary Injunction based on the fact that Plaintiff failed to meet either prong of the preliminary injunction standard.

DATED: July 7, 2017.

Respectfully submitted,

ADAM PAUL LAXALT  
Nevada Attorney General

By: /s/ Barrack T Potter  
BARRACK T POTTER (Bar No. 14105)  
Deputy Attorney General

*Attorneys for Defendants*

**CERTIFICATE OF SERVICE**

I certify that I am an employee of the State of Nevada, Office of the Attorney General, and that on July 7, 2017, I electronically filed the foregoing **Defendants' Amended Opposition to Plaintiff's Motion for Temporary Restraining Order and Preliminary Injunction** via this Court's electronic filing system. Parties that are registered with this Court's electronic filing system will be served electronically. For those parties not registered, service was made by depositing a copy for mailing in the United States Mail, first-class postage prepaid at Las Vegas, Nevada to the following:

Shannon Carter, #70773  
High Desert State Prison  
P.O. Box 650  
Indian Springs, NV 89070-0650  
*Plaintiff, Pro Se*

/s/ Angelica Collazo

Angelica Collazo, an employee of the  
Office of the Nevada Attorney General

# EXHIBIT 1

# EXHIBIT 1

**NAME**

**DPF**

## MEDICAL ALERTS

DOF 2562 (3/95)

# EXHIBIT 2

# EXHIBIT 2

1 DECL  
ADAM PAUL LAXALT  
2 Nevada Attorney General  
BARRACK T POTTER (Bar No. 14105)  
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*Attorneys for Defendants  
8 State of Nevada, James  
Dzurenda, Scherrie Bean,  
9 and Ronrico Mangapit*

10 DISTRICT COURT  
11 CLARK COUNTY, NEVADA  
12

13 SHANNON CARTER,  
14 Plaintiff,

15 v.

16 JOHN DOE HDSP DENTIST, et al.,  
17 Defendants.  
18

Case No. A-16-747779-C  
Dept. No. II

**DECLARATION OF SCHERRIE  
BEAN**

19 I, Scherrie Bean, hereby declare based on personal knowledge, that the following  
20 assertions are true:

21 1. I am currently employed by the Nevada Department of Corrections as a  
22 Dental Assistant 2.

23 2. I have been employed with the Nevada Department of Corrections for a total  
24 of nine years.

25 3. My job responsibilities include set up and breakdown before and after  
26 treatment.

27 4. Additionally, I assist the dentist during treatment.

28 5. I am familiar with Plaintiff, Shannon Carter, inmate number 70773.

1           6. According to his dental chart, Plaintiff was seen on three separate occasions  
2 for treatment in 2016.

3           7. Plaintiff had x-rays taken on April 21, 2016 by Dr. Mangapit.

4           8. Dr. Mangapit determined that Plaintiff would need multiple teeth filled.

5           9. Dr. Mangapit completed Plaintiff's first filling on June 16, 2016 and Plaintiff  
6 was scheduled for another appointment to address another tooth that Plaintiff was  
7 having issues with.

8           10. Plaintiff was then scheduled for another filling, which was completed by Dr.  
9 Mangapit on September 1, 2016.

10           11. Plaintiff was then scheduled for more treatment on October 6, 2016;  
11 however, Plaintiff was rescheduled to February 1, 2017 due to an emergency recall by the  
12 prison.

13           12. Plaintiff was seen by Dr. Bitar and I on February 1, 2017.

14           13. During that visit, Plaintiff stated that he did not have any dental issues  
15 concerning him and that he did not want to be seen for any treatment.

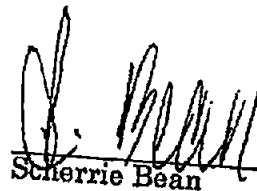
16           14. Furthermore, Plaintiff claimed that all of his dental treatment had already  
17 been completed and he did not even know why he was called to dental.

18           15. Plaintiff claimed that he did not want to be seen for treatment, but  
19 instead wanted the names of the dental assistants for his civil lawsuit.

20           16. Dr. Bitar told Plaintiff that the requested information could not be released  
21 to him and Plaintiff was sent back to his cell.

22           Pursuant to NRS 53.045, I declare under penalty of perjury that the  
23 foregoing is true and correct.

24           EXECUTED this 30th day of June, 2017.

25  
26  
27  
28  
  
Sherrie Bean



# EXHIBIT 3

EXHIBIT 3

JUN-29-2017 04:33PM From:HDSP AA1

7028796760

To:917024863773

Page:4/8

SIGNATURE: Shannon CarterID# 70773

(Also print name and ID# at bottom of form where indicated)

Institution: H.D.S.PDate submitted: 2/20/16Unit/House: 10C27BMedical: ☐Dental: ☒Mental Health: ☐Nursing: ☐

Other: \_\_\_\_\_

Reason for request: (Describe below)

I have been in prison since 2001. I have been to the dentist (1) time I am feeling pain in some of my back teeth I would like to have them cleaned and filled thank you

DO NOT WRITE IN AREA BELOW

Response to request:

APPT. SCHED.

YOU'LL BE NOTIFIED THE  
DAY OF APPOINTMENT2/21/16

- ☐ Appointment Schedule for: 1 / 1 Rescheduled for: 1 / 1
- ☐ No visit necessary
- ☐ No Show for Appointment
- ☐ Refused to be seen. DOC 2523-Release of Liability signed

## PRESCRIPTIONS

- ☐ KOP ☐ NON-KOP
- ☐ Order Date: 1 / 1

## PLAN

- ☐ Follow-up appointment 1 / 1 ☐ Return if needed
- ☐ No follow-up required 4/3

Signature/Title of Provider

Date 2.29.16

NEVADA DEPARTMENT OF CORRECTIONS

MEDICAL KITE and/or  
SERVICE REPORTNAME: Carter Shannon JD

Last

First

MI

ID# 70773

JUN-29-2017 04:33PM From:HDSP AA1

7028796760

To:917024863773

Page:5/8

## INMATE REQUEST FORM

1.) INMATE NAME	DOC #	2.) HOUSING UNIT	3.) DATE
Shannon Carter	70773	10 C 27	3/5/16

4.) REQUEST FORM TO: (CHECK BOX)

<input type="checkbox"/> CASEWORKER	<input type="checkbox"/> MEDICAL	<input type="checkbox"/> MENTAL HEALTH	<input type="checkbox"/> CANTEEN
<input type="checkbox"/> EDUCATION	<input type="checkbox"/> VISITING	<input type="checkbox"/> LAW LIBRARY	<input checked="" type="checkbox"/> DENTAL
<input type="checkbox"/> LAUNDRY	<input type="checkbox"/> PROPERTY ROOM	<input type="checkbox"/> SHIFT COMMAND	<input type="checkbox"/> OTHER

5.) NAME OF INDIVIDUAL TO CONTACT:

6.) REQUEST: (PRINT BELOW) I have a hole in my molar food and debris gets in the hole causing continuing Pain and Some times wakes me up from my Sleep. I am requesting to have it filled not Pulled can you Please appoint Me to come up as soon as Possible

Thank you

7.) INMATE SIGNATURE Shannon Carter DOC # 70773

8.) RECEIVING STAFF SIGNATURE [Signature] DATE 3/5/16

9.) RESPONSE TO INMATE

APPT. SCHED.  
YOU'LL BE NOTIFIED THE  
DAY OF APPOINTMENT

RESPONDING STAFF SIGNATURE

DATE

3.11.16

CARTER S.

DOC - 3012 (REV. 7/01)

JUN-29-2017 04:33PM From:HDSP AA1

7028796760

To:917024863773

Page:6/8

## INMATE REQUEST FORM

1.) INMATE NAME	DOC.#	2.) HOUSING UNIT	3.) DATE
Shannon Carter	70773	16 C 27	3/30/16

4.) REQUEST FORM TO: (CHECK BOX)

☐ CASEWORKER    ☐ MEDICAL    ☐ MENTAL HEALTH    ☐ CANTEEN  
☐ EDUCATION    ☐ VISITING    ☐ LAW LIBRARY    ☒ DENTAL  
☐ LAUNDRY    ☐ PROPERTY ROOM    ☐ SHIFT COMMAND    ☐ OTHER

5.) NAME OF INDIVIDUAL TO CONTACT: Dental

6.) REQUEST (PRINT BELOW) I first wrote a kite 2/20/16 about the pain I am having in my teeth I then wrote a kite again 3/5/16 I am now writing a kite again on 3/31/16 my gums are now bleeding and swelling I havent eat in 3 days havent slept in 4 the pain is a (9) out of (10) I believe its my back molars have holes in them foods getting in there need to be filled. Again cant sleep or eat very painful I need to be seen because is causing my blood pressur to be constistly elevated due to lack of sleep and stress

7.) INMATE SIGNATURE Shannon Carter DOC # 707738.) RECEIVING STAFF SIGNATURE [Signature] DATE 3/30/16

## 9.) RESPONSE TO INMATE

Referred to dental

Have you seen a sick call nurse until we can get you in?

APR 01 2016

APPT. SCHED' 4/4/16 CM

YOU'LL BE NOTIFIED THE  
DAY OF APPOINTMENT

RESPONDING STAFF SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

JUN-29-2017 04:34PM From:HDSP AA1

7028796760

To:917024863773

Page:7/8

## INMATE REQUEST FORM

1.) INMATE NAME	DOC #	2.) HOUSING UNIT	3.) DATE
Shannon Carter	70773	10 <sup>e</sup> 27	4/8/16

4.) REQUEST FORM TO: (CHECK BOX)

<input type="checkbox"/> CASEWORKER	<input type="checkbox"/> MEDICAL	<input type="checkbox"/> MENTAL HEALTH	<input type="checkbox"/> CANTEEN
<input type="checkbox"/> EDUCATION	<input type="checkbox"/> VISITING	<input type="checkbox"/> LAW LIBRARY	<input checked="" type="checkbox"/> DENTAL
<input type="checkbox"/> LAUNDRY	<input type="checkbox"/> PROPERTY ROOM	<input type="checkbox"/> SHIFT COMMAND	<input type="checkbox"/> OTHER

5.) NAME OF INDIVIDUAL TO CONTACT: "Dental"

6.) REQUEST: (PRINT BELOW) I have been requesting to <sup>be</sup> seen by Dental since 1/20/16 my condition has turned for the worst my gums are swelling and bleeding food is getting in holes in my back teeth causing great pain I haven't been able to eat or sleep for weeks now this is causing my Blood Pressure to be Very High I received a kite back from the dentist stating "refused dental" which is not true I have not been contacted anyone to refuse dental. the kite also asked if I <sup>talked</sup> to a nurse which I have <sup>talked</sup> times and she stated my blood pressure is very high so I need to write a kite which I am. I need to be seen to have my teeth filled <sup>am</sup> is (9) out of (10) cant eat or sleep Blood Pressure Very High

7.) INMATE SIGNATURE Shannon Carter DOC # 70773

8.) RECEIVING STAFF SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

## 9.) RESPONSE TO INMATE

If a nurse is telling you your blood pressure is high can't she provide an antibiotic +/or a pain pack until we can get you in?

4/13/16 CM

APPT. SCHED' YOU'LL BE NOTIFIED THE DAY OF APPOINTMENT

10.) RESPONDING STAFF SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

UN-29-2017 04:33PM From:HDSP AA1

7028796760

To:917024863773

Page:3/8

## INMATE REQUEST FORM

1.) INMATE NAME	DOC #	2.) HOUSING UNIT	3.) DATE
Shannon Carter	70773	10 C 27	4/17/16

- 4.) REQUEST FORM TO: (CHECK BOX)
- ☐ CASEWORKER    ☐ MEDICAL    ☐ MENTAL HEALTH    ☐ CANTEEN  
☐ EDUCATION    ☐ VISITING    ☐ LAW LIBRARY    ☒ DENTAL  
☐ LAUNDRY    ☐ PROPERTY ROOM    ☐ SHIFT COMMAND    ☐ OTHER

5.) NAME OF INDIVIDUAL TO CONTACT: Dental

6.) REQUEST: (PRINT BELOW) I ~~had~~ First wrote a kite for dental 2/20/16 explaining my pain in my back teeth due to holes in my molars since then I have wrote several more kites due to my condition decreasing I have not been able to sleep or eat due to this pain which now is effecting my blood pressure I was seen by the Nures to have my blood pressure checked she stated it was very High I told her my teeth have been causing me pain haven't ate or slept she stated write a kite to see the doctor which I did to no avail. I received my blood pressure refill from pill call nurse I explained to her my pain in my teeth and that I haven't ate or slept she told me she don't deal with "Dental" write a kite. Now I don't know what the procedures are for serious medical needs are but I need to be seen now I can't eat or sleep pain is about 8/10 and it effecting my blood pressure

7.) INMATE SIGNATURE Shannon Carter DOC # 70773

8.) RECEIVING STAFF SIGNATURE [Signature] DATE 4/21/16

## 9.) RESPONSE TO INMATE

10.) RESPONDING STAFF SIGNATURE CM

DATE 4/28/16 CM

JN-29-2017 04:33PM From:HDSP AA1

7028796760

To:917024863773

Page:2/8

## INMATE REQUEST FORM

1.) INMATE NAME <u>Shannon Carter</u>	DOC # <u>70773</u>	2. HOUSING UNIT <u>8C/14A</u>	3.) DATE <u>1/6/17</u>
--	-----------------------	----------------------------------	---------------------------

## 4.) REQUEST FORM TO: (CHECK BOX)

☐ CASEWORKER☒ MEDICAL☐ VITAL HEALTH☐ CANTEEN☐ EDUCATION☐ VISITING☐ LIBRARY☐ DENTAL☐ LAUNDRY☐ PROPERTY ROOM☐ SHIFT COMMAND☐ OTHER

## 5.) NAME OF INDIVIDUAL TO CONTACT:

Medical Director

## 6.) REQUEST: (PRINT BELOW)

Sir I am filing a civil complaint on the constitutional violations made by dental to pursue I must inform the court of the defendants full name my kites were signed SB and CM I need the full name of these defendants which are dentist ass. and the name of my dentist can you please provide this information.

Thank you for your time

Shannon Carter

## 7.) INMATE SIGNATURE

Shannon Carter

DOC # 70773

## 8.) RECEIVING STAFF SIGNATURE

DATE

## 9.) RESPONSE TO INMATE

referred to dental

**-YOUR APPOINTMENT WILL BE WITHIN  
60 DAYS OR SOONER**

**-IF YOUR SYMPTOMS WORSEN  
PRIOR TO YOUR APPOINTMENT,  
PLEASE INFORM THE SICK CALL  
NURSE**

seen 2/1/17. Patient  
stated that all dental  
treatment had already  
been completed. Requested  
information cannot be  
released via this form.

**E-MAILED**

1/13/16

to Dr. Aranda

JAN 21 2017

## 10.) RESPONDING STAFF SIGNATURE

DATE

Attachment (B)

(B)

Attachment (B)



8C/114A  
COP

# State of Nevada Department of Corrections

## INMATE GRIEVANCE REPORT

ISSUE ID# 20063023297

ISSUE DATE: 05/10/2016

INMATE NAME		NDOC ID	TRANSACTION TYPE		ASSIGNED TO	
CARTER, SHANNON D		70773	RTRN_L2		RARANAS	
LEVEL	TRANSACTION DATE	DAYS LEFT	FINDING	USER ID	STATUS	
2	11/18/2016		Denied	VAUSTIN	A	
INMATE COMPLAINT						
OFFICIAL RESPONSE						
<p>Mr. Carter,</p> <p>Based on your medical records, on 4/4/16, you were scheduled to see the dentist but unfortunately you were not seen because your unit was on lock down on that day for safety and security reasons. On 4/29/16, you had a dental consult. You were told that you need fillings on teeth #18, 19 and 31 and pain medications were prescribed. On 6/6/16, filling was done based on the finding that this tooth had the largest cavity. X-rays were taken. Just like any other Department, Inmate services and appointments will be provided using the priority system established by the institution dentist per AR 631. There other inmates waiting for their turn to be seen. A dentist may extract several teeth, or fill multiple teeth, or extract one tooth or fill one tooth depending on the case and the situation and time needed and available. You are advised to submit a kite about your dental complaint and service will be rendered appropriately and accordingly.</p> <p>Grievance denied</p>						

*Shannon D. Carter*

*R. Raranas, MD*  
Ramon Raranas, MD  
Medical Director NDOC

GRIEVANCE RESPONDER

DEC 14 2016

RECEIVED

JAN 10 2017

Page 5 of 6

WARDEN

Report Name: NVRIGR

Reference Name: NOTIS-RPT-OR-0217.3

Run Date: NOV-18-16 10:00 AM

LOG NUMBER:

20063023297NEVADA DEPARTMENT OF CORRECTIONS  
SECOND LEVEL GRIEVANCENAME: Shannon CarterI.D. NUMBER: 70773INSTITUTION: H. P. S. PUNIT: 12-F-13

I REQUEST THE REVIEW OF THE GRIEVANCE, LOG NUMBER 20063023297, ON THE SECOND LEVEL. THE ORIGINAL COPY OF MY GRIEVANCE AND ALL SUPPORTING DOCUMENTATION IS ATTACHED FOR REVIEW.

## SWORN DECLARATION UNDER PENALTY OF PERJURY

INMATE SIGNATURE: Shannon Carter DATE: 8.9.16

WHY DISAGREE: It take 147 days to be treated for my serious medical needs upon treatment the dental doctor determined I had 4 more cavities yet refused to treat them told me when I can no longer take the pain put in a kite I informed him I was in pain and if I put in a kite they will charge me again when I already here I was informed that I would be put on a dental plan this has not happen please Help!

GRIEVANCE COORDINATOR SIGNATURE: [Signature] DATE: 8-10-16

SECOND LEVEL RESPONSE: \_\_\_\_\_

RECEIVED  
AUG 11 2016  
11038

\_\_\_\_ GRIEVANCE UPHELD ☒ GRIEVANCE DENIED \_\_\_\_\_ ISSUE NOT GRIEVABLE PER AR 740

SIGNATURE: [Signature] TITLE: MD DATE: 12/14/16

GRIEVANCE COORDINATOR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

INMATE SIGNATURE: Shannon Carter DATE: 11/17/2017

## THIS ENDS THE FORMAL GRIEVANCE PROCESS

Original:	To inmate when complete, or attached to formal grievance
Canary:	To Grievance Coordinator
Pink:	Inmate's receipt when formal grievance filed
Gold:	Inmate's initial receipt

JAN 10 2017



**State of Nevada**  
**Department of Corrections**

*INMATE GRIEVANCE REPORT*

**ISSUE ID#** 20063023297

**ISSUE DATE:** 05/10/2016

<b>INMATE NAME</b> CARTER, SHANNON D		<b>NDOC ID</b> 70773	<b>TRANSACTION TYPE</b> RTRN_L1	<b>ASSIGNED TO</b> ABUENCAMINO	
<b>LEVEL</b> 1	<b>TRANSACTION DATE</b> 07/26/2016	<b>DAYS LEFT</b> 4	<b>FINDING</b> Denied	<b>USER ID</b> HSAMS	<b>STATUS</b> A
<b>INMATE COMPLAINT</b>					
<b>OFFICIAL RESPONSE</b>					
Based on your medical records, on 6/16/16, you were evaluated, examined and given the necessary dental treatment (fillings) by the dentist. Several x-rays were performed and you were advised if any other symptoms develop, submit a kite and you will be scheduled accordingly.					
Grievance Denied.					

AUG 11 2016  
6:00P

*Tito Buencamino* DOKS I 8/1/16  
GRIEVANCE RESPONDER

Report Name: NVRIGR

Reference Name: NOTIS-RPT-OR-0217.2

Run Date: JUL-26-16 03:36 PM

JUL 10 2017 Page 1 of 4

Medical  
ABLog Number 20063023297NEVADA DEPARTMENT OF CORRECTIONS  
FIRST LEVEL GRIEVANCENAME: Shannon Carter I.D. NUMBER: 70773INSTITUTION: H.D.S.P UNIT: 12-F-13I REQUEST THE REVIEW OF THE GRIEVANCE, LOG NUMBER 20063023297, IN A FORMAL MANNER. THE ORIGINAL COPY OF MY GRIEVANCE AND ALL SUPPORTING DOCUMENTATION IS ATTACHED FOR REVIEW.

## SWORN DECLARATION UNDER PENALTY OF PERJURY

INMATE SIGNATURE: Shannon Carter DATE: 6.24.16WHY DISAGREE: I informed dental to my serious medical need in february modified lockdown was in April there was and is "No" reason it should have taken 147 days to be treated for A condition that was determined by a dentist needed treatment. This Practice and or Police is Deliberate and Indifferent to my Serious medical needs and must be addressed appropriately.GRIEVANCE COORDINATOR SIGNATURE: J. Powell DATE: 6.27.16

FIRST LEVEL RESPONSE:

SPE ATTACHED

RECEIVED

       GRIEVANCE UPHELD        GRIEVANCE DENIED        ISSUE NOT GRIEVABLE PER AR 740WARDEN'S SIGNATURE: Titus Bureau TITLE: DOCS I DATE: 8/1/16GRIEVANCE COORDINATOR SIGNATURE: J. Powell DATE: 7-26-16       INMATE AGREES ✓ INMATE DISAGREESINMATE SIGNATURE: Shannon Carter DATE: 8.5.16

FAILURE TO SIGN CONSTITUTES ABANDONMENT OF THE CLAIM. A SECOND LEVEL GRIEVANCE MAY BE PURSUED IN THE EVENT THE INMATE DISAGREES.

Original:	To inmate when complete, or attached to formal grievance
Canary:	To Grievance Coordinator
Pink:	Inmate's receipt when formal grievance filed
Gold:	Inmate's initial receipt

JAN 10 2017



Case 2:17-cv-01628-RFB-ESY Document 18-1 Filed 10/03/18 Page 29 of 64

**State of Nevada**  
**Department of Corrections**

**INMATE GRIEVANCE REPORT**

**ISSUE ID#** 20063023297

**ISSUE DATE:** 05/10/2016

<b>INMATE NAME</b> CARTER, SHANNON D		<b>NDOC ID</b> 70773	<b>TRANSACTION TYPE</b> RTRN_INF	<b>ASSIGNED TO</b> LSTEWART	
<b>LEVEL</b> IF	<b>TRANSACTION DATE</b> 06/07/2016	<b>DAYS LEFT</b> 5	<b>FINDING</b> Denied	<b>USER ID</b> RZANER	<b>STATUS</b> A
<b>INMATE COMPLAINT</b>					
<b>OFFICIAL RESPONSE</b>					
THE LAST TIME YOU SAW DENTAL WAS 4/29/16. IT WAS NOTED YOU NEED FILLINGS. BECAUSE OF THE MODIFIED LOCKDOWN ON UNIT 10 THE LIST OF I/M FROM UNIT 10 HAS GROWN. YOU ARE ON THE DENTAL LIST AND WILL BE SEEN AT THE NEXT AVAILABLE APPOINTMENT.					

RECEIVED

11/10/2016

11/10/2016

11/10/2016

*L. Stewart*  
GRIEVANCE RESPONDER

Report Name: NVRIGR

Reference Name: NOTIS-RPT-OR-0217.2

Run Date: JUN-07-16 10:54 AM

11/10/2016 Page 1 of 2

Medical

Log Number 20063023297

10A

NEVADA DEPARTMENT OF CORRECTIONS  
INFORMAL GRIEVANCENAME: Shannon Carter I.D. NUMBER: 70773INSTITUTION: H.D.S.P. UNIT: 10

GRIEVANT'S STATEMENT: H.D.S.P. Dental Program and/or Policy is inadequate and Deliberate indifference to my serious medical needs I first informed "Dental" to the Pain in my teeth ON 2.20.16 I was told I would be scheduled ON 3.5.16 I informed "Dental" in more detail of my "issue" that my back molars food and debris gets in the holes causing Pain and wakes me from my sleep and I need to be

## SWORN DECLARATION UNDER PENALTY OF PERJURY

INMATE SIGNATURE: Shannon Carter DATE: 5/2/16 TIME: 6 PMGRIEVANCE COORDINATOR SIGNATURE: J. Powell DATE: 5/5/16 TIME: 8

GRIEVANCE RESPONSE: \_\_\_\_\_

RECEIVED

CASEWORKER SIGNATURE: Stewart CNT DATE: 6/15/16

\_\_\_\_ GRIEVANCE UPHELD \_\_\_\_ GRIEVANCE DENIED \_\_\_\_ ISSUE NOT GRIEVABLE PER AR 740

GRIEVANCE COORDINATOR APPROVAL: J. Powell DATE: 6/8/16\_\_\_\_ INMATE AGREES X INMATE DISAGREESINMATE SIGNATURE: Shannon Carter DATE: 6.22.16

FAILURE TO SIGN CONSTITUTES ABANDONMENT OF THE CLAIM. A FIRST LEVEL GRIEVANCE MAY BE PURSUED IN THE EVENT THE INMATE DISAGREES.

Original: To inmate when complete, or attached to formal grievance  
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 Gold: Inmate's initial receipt

2017 10 27

**NEVADA DEPARTMENT OF CORRECTIONS  
GRIEVANT'S STATEMENT CONTINUATION FORM**

NAME: Shannon Carter I.D. NUMBER: 70773

INSTITUTION: H.D.S.P. UNIT #: 10

GRIEVANCE #: \_\_\_\_\_ GRIEVANCE LEVEL: Informal

GRIEVANT'S STATEMENT CONTINUATION: PG. 2 OF 4

Seen as soon as possible ON 3-30-16 I informed "Dental" that my gums are bleeding and swelling that I haven't ate in days and hadn't slept I further informed "Dental" that my Pain was a(9) out of (10) and Due to this condition it is elevating my (blood Presser) again to "No" Avail ON 4-8-16 I informed Dental that my condition is getting really bad that I still cant eat or sleep that the Pain is a(9) out of (10) and that this is causing my blood PRESSER to increase and still I was never even seen by a dentist Not until 4-21-16 was I finly seen by a dentist <sup>(10) days</sup> TAN X- RAY was taken and dentist examined my teeth and determined I indeed had at less (3) teeth that were in need of medical a treatment I informed him "Dentist" that my Pain was a(9) out of (10) and that I cant eat and haven't really slept and that this was effecting my blood pressure which he stated my teeth have nothing to do with my blood pressure and that he will treat my teeth because they need very much so to be treated. He then told me I could leave. I ask him when will he treat me because I cant take the Pain he said he will put me on the list. ~~I have been on the list for 3 weeks~~ my teeth have Chipped (3) times since I requested to be treated Due to the

Original: Attached to Grievance  
Pink: Inmate's Copy

JAN 10 2017

**NEVADA DEPARTMENT OF CORRECTIONS  
GRIEVANT'S STATEMENT CONTINUATION FORM**

NAME: Shannon Carter I.D. NUMBER: 70773

INSTITUTION: H.D.S.P UNIT #: 10

GRIEVANCE #: \_\_\_\_\_ GRIEVANCE LEVEL: Informal

GRIEVANT'S STATEMENT CONTINUATION: PG. 3 OF 4

holes in my back teeth not being treated. Dental care is one of the most important medical needs of inmates. It has been (74) days and counting and I have not been treated for a serious medical need that is affecting my over all health. The refusal to treat my infected teeth despite several complaints shows the deliberate indifference of "dental" and there Practice /Policy they have to take care of serious medical <sup>Needs</sup> this is unexceptable I have been in more pain the last (74) days then I ever been in all my life my teeth are chipping away I havent slept more then (3) hours straight in the Night I cant eat when I try to eat food get stuck in my teeth and the pain is unbearable then my mouth swells and my gums bleed. I dont try and eat for a few days it gos down. The refusal to treat my serious medical need and forcing me to indor this Pain witch has and is effecting my blood Pressure is a Violations of my Eighth amendment Rights (Remedy) An adequate Policy Put in Place To address all serious medical needs timely and appropriately No one should have to wait over (74) days to be treated <sup>when</sup> they tell you they cant eat or sleep and the Pain is a (9) out of (10) Now a (10) out of (10)

Original: Attached to Grievance  
Pink: Inmate's Copy

RECEIVED

JAN 10 2018



NEVADA DEPARTMENT OF CORRECTIONS  
GRIEVANT'S STATEMENT CONTINUATION FORM

NAME: Shannon Carter I.D. NUMBER: 70773

INSTITUTION: H.D.S.P UNIT #: 10

GRIEVANCE #: \_\_\_\_\_ GRIEVANCE LEVEL: Informal

GRIEVANT'S STATEMENT CONTINUATION: PG. 4 OF 4

"I would like to know what is the "Policy" here with treating serious medical needs?"

"This grievance is about one issue H.D.S.P Dental Program being deliberate and indifferent to my serious medical need in violation of my 8<sup>th</sup> amendment right"

RECEIVED

10/03/18

10/03/18

10/03/18

10/03/18

Original: Attached to Grievance  
Pink: Inmate's Copy

10/03/18

10/03/18

Attachment (c)

(C)

Attachment (c)



# Nevada Department of Corrections

## Improper Grievance Memo

Brian Sandoval  
Governor

James Dzurenda  
Director

Brian E. Williams, Sr.  
Warden, HDSP

TO: Carter, Shannon #70773 8C/14  
FROM: J. Nash, AW   
DATE: 4/18/2017

RE: Improper Grievance #2006-30-46164 IF Level Grievance

The attached grievance is being returned to you for the following reason(s):

**This grievance may NOT proceed to the next level Per AR 740.03,5 due to the following:**

- ☐ Non-grievable issue.
  - ☐ State and federal court decision.
  - ☐ State, federal and local laws and regulations.
  - ☐ Parole Board decision.
  - ☐ Lacks standing.
- ☒ **Untimely submission.** This is a violation of A.R. 740.03 (10) & 740.05 (4)(A)
- ☐ Abuse of Inmate Grievance Procedure.
  - ☐ Any language, writing or illustration deemed to be obscene, profane or derogatory.
  - ☐ A threat of serious bodily injury to a specific individual.
  - ☐ Specific claims or incidents previously filed by the same inmate.
  - ☐ More than one (1) grievance per week, Monday through Sunday.
  - ☐ More than two (2) unfounded, frivolous or vexatious grievances per month.

**After correcting the deficiencies(s) listed below; you may re-submit your grievance at the same level.**

- ☐ The grievance contains more than one (1) appropriate issue. Only 1 issue is allowed per grievance.
- ☐ No factual harm/loss noted and/or no remedy requested.
- ☐ Other; specify:

Failure to re-submit the grievance through the prescribed timeframe shall constitute abandonment.

CCSC Bm  
Witness Signature

4/21/17  
Date

Inmate Signature

4-21-17  
Date

cc: Original – Inmate  
Copy - Grievance File

Log Number 2006.30.46164

**NEVADA DEPARTMENT OF CORRECTIONS  
INFORMAL GRIEVANCE**

NAME: Shannon Carter I.D. NUMBER: 70773INSTITUTION: H.D.S.P UNIT: 8<sup>C</sup>/4GRIEVANT'S STATEMENT: "Retaliation", on or about February 1, 2017

I was placed on Dental Sick call by the A.G.'s office to correct a constitutional violation by H.D.S.P Dental programs Deliberate and indifference, refusing to treat my infected tooth which was and still is causing extreme pain lost of sleep High Blood Pressure, weight lost from

**SWORN DECLARATION UNDER PENALTY OF PERJURY**INMATE SIGNATURE: Shannon Carter DATE: 4.6.17 TIME: 5:30GRIEVANCE COORDINATOR SIGNATURE: [Signature] DATE: 4-10-17 TIME: 11:05 AM

GRIEVANCE RESPONSE: See attached response  
Not accepted

CASEWORKER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

\_\_\_ GRIEVANCE UPHELD \_\_\_ GRIEVANCE DENIED \_\_\_ ISSUE NOT GRIEVABLE PER AR 740

GRIEVANCE COORDINATOR APPROVAL: [Signature] DATE: 4-19-17\_\_\_ INMATE AGREES ☒ INMATE DISAGREESINMATE SIGNATURE: [Signature] DATE: 4-21-17

FAILURE TO SIGN CONSTITUTES ABANDONMENT OF THE CLAIM. A FIRST LEVEL GRIEVANCE MAY BE PURSUED IN THE EVENT THE INMATE DISAGREES.

Original: To inmate when complete, or attached to formal grievance  
Canary: To Grievance Coordinator  
Pink: Inmate's receipt when formal grievance filed  
Gold: Inmate's initial receipt

**RECEIVED****APR 12 2017****HDSP**

**NEVADA DEPARTMENT OF CORRECTIONS  
GRIEVANT'S STATEMENT CONTINUATION FORM**

NAME: Shannon Carter I.D. NUMBER: 70773  
 INSTITUTION: H D S P UNIT #: 8<sup>C</sup> 14  
 GRIEVANCE #: \_\_\_\_\_ GRIEVANCE LEVEL: Informal  
 GRIEVANT'S STATEMENT CONTINUATION: PG. 2 OF 3

not being able to eat, white blisters which I popped, Swell jaw and Chipping tooth Upon arrival at Dental, A white male dentist asked me why I was there before I could answer the dentist assistant S. Bean Stated that's the cry baby how filed a law suit on me! The white male Dentist then Stated we dont treat inmates how try to file law suits on us. I then let the Dentist know That I was in alot of pain and had been unable to Sleep and eat reguarly for months Dentist Assistant Bean then Stated her husband was a L.T. at (H D S P) and I didnt know what pain was yet! I then told the Dentist that the other Dentist how treated me last time now I had (3) infected teeth but only treated (2) and if he was going to treat my infected tooth are not he then Stated are you going to drop your law suit I statted No! And he then Stated then No I am not treating you. Bean then Stated go back to your unit when you cant take the pain you'll be back. The actions of the white male Dentist and Assist Bean was "Retaliatory" and indirect Violation of my Constitutional rights to be free from Retaliation from filing grievance and Civil Complaints I now fear for my Safety and health here at (H D S P)

Original: Attached to Grievance  
 Pink: Inmate's Copy

NEVADA DEPARTMENT OF CORRECTIONS  
GRIEVANT'S STATEMENT CONTINUATION FORM

NAME: Shannon Carter I.D. NUMBER: 70773

INSTITUTION: (H.D.S.P.) UNIT #: 8<sup>C</sup> 14

GRIEVANCE #: \_\_\_\_\_ GRIEVANCE LEVEL: Informal

GRIEVANT'S STATEMENT CONTINUATION: PG. 3 OF 3

Pertaining to my dental care and officers related to defendants in  
(H.D.S.P) Dental program Specifically Lt. Bean.

(Remedy) Immediate transference to a different yard  
for permanent housing were I can receive adequate Dental  
care free of retaliation and to Pursue a 1983 claim for retaliation  
and denial of dental care by (H.D.S.P) Dental program

Original: Attached to Grievance  
Pink: Inmate's Copy

# NEVADA DEPARTMENT OF CORRECTIONS ADMINISTRATIVE CLAIM FORM

THIS FORM MUST BE COMPLETED PER NRS 41.036, 41.0322,  
209.243 AND ADMINISTRATIVE REGULATION 740

DO NOT SEND DIRECTLY TO ATTORNEY GENERAL'S OFFICE,  
BOARD OF EXAMINERS, OR DIRECTOR

This form is to be attached to your grievance form for any injuries or any other claim (except property) arising out of a tort alleged to have occurred during your incarceration as a result of an act or omission of the Department of Corrections or any of its agents, former officers, employees or contractors.

The following information is necessary to fairly evaluate your claim. Please provide complete information. If you need more space, attach a separate sheet of paper. You may submit additional evidence if available. Such additional evidence will be returned.

CLAIM IN THE AMOUNT OF \$ 40,000 is hereby made against the Department of Corrections, based upon the following facts:

1. NAME OF CLAIMANT (Please print full name) <u>Shannon Carter</u>		2. I.D. # <u>70773</u>	3. INSTITUTION <u>HDSP</u>
4. AMOUNT OF CLAIM <u>\$ 40,000</u>	5. DATE AND DAY OF OCCURRENCE <u>on/or About feb 1, 2017</u>		6. TIME (a.m. or p.m.) <u>9:30 AM</u> <u>9/250</u>
7. PLACE OF OCCURRENCE <u>HDSP medical Dental</u>			

8. Describe here, in complete detail, exactly how your claim loss or damage occurred and why you believe the institution is responsible or liable:

(HDS P) Dental determined I had (3) infected teeth it took a 156 days of unbelievable pain before dental treated (2) of the (3) bad teeth stating when I can't take the pain contact them and they'll treat the other tooth I then filed a Civil Suit the AG's office put me on sick call to have the third tooth treated. Dental refused to correct and or treat me stating they will only treat me if I drop my law suit in retaliation of my law suit this is a clear and direct violation of my constitutional rights to be free of retaliation

9. Witnesses. Be sure to include any staff member who may have been involved in, or has any knowledge of, your alleged loss; also, list any inmate who has actual knowledge of facts pertinent to your claim:

Max Reed # 1068078

Gregory Vancott # 1164456

10. Other pertinent information:

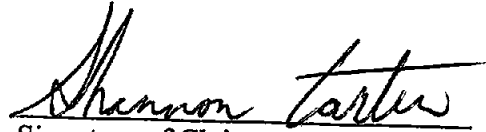


STATE OF Nevada )  
COUNTY OF Indian Springs ) SS

I, Shannon Carter, do hereby swear under penalty of perjury that I am the claimant named above, that I have read the foregoing claim and know the contents thereof, that the same is true of my own knowledge, except those matters stated upon information and belief, and as to those matters, I believe them to be true, and that THIS IS MY ENTIRE CLAIM AGAINST THE STATE OF NEVADA/DEPARTMENT OF CORRECTIONS.

I FULLY UNDERSTAND THAT I WILL HAVE TO SIGN A GENERAL RELEASE OF ALL CLAIMS IN THE PRESENCE OF A NOTARY PUBLIC FOR THE EXACT AMOUNT I AM CLAIMING BEFORE ANY PAYMENT WILL BE OFFERED TO ME. THIS GENERAL RELEASE WILL BECOME EFFECTIVE ONLY UPON ACTUAL PAYMENT OF THE CLAIM BY THE STATE OF NEVADA.

DATED this 6 day of April, 20 17

  
Signature of Claimant

#### NOTICE

NEVADA REVISED STATUTE 197.160 provides that every person who knowingly presents a false or fraudulent claim is guilty of a gross misdemeanor, and is subject to criminal penalties of imprisonment of up to one year, and a fine of up to \$2,000.00.

DOC - 3095 (12/01)

**NEVADA DEPARTMENT OF CORRECTIONS**  
**ADMINISTRATIVE CLAIM RELEASE AGREEMENT**

I, Shannon Carter, NDOC # 70773 as claimant, did on the 6 day of April, 2017, file against and deliver to the Department of Corrections, via the Warden of High Desert State Prison, an institution/facility of the Department of Corrections, an Inmate Grievance No. \_\_\_\_\_, alleging personal injuries or any other claim arising out of a tort alleged to have occurred during my incarceration as a result of an act or omission of the Department of Corrections or any of its agents, former officers, employees, or contractors described as Dental program

I acknowledge that \$ \_\_\_\_\_ will be deposited into my account as payment in full, for the above claim and hereby release the State of Nevada, the Nevada Department of Corrections and any and all agents, servants and/or employees of the state and agency from all liability of any kind whatsoever from any further claim for items identified on this grievance.

I UNDERSTAND THIS RELEASE WILL BECOME EFFECTIVE ONLY UPON  
 THE APPROVAL OF MY CLAIM BY THE STATE OF NEVADA AND/OR  
 THE NEVADA DEPARTMENT OF CORRECTIONS.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

SIGNED: \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_  
                     Signature of Claimant

WITNESS: \_\_\_\_\_ TITLE: \_\_\_\_\_

Attachment (D)

(D)

Attachment (D)

Shannon Carter #70773  
 PO Box 650  
 Indian Springs NV 89070  
 Pro-Se

FILED

2017 JUN 12 1 A 9 06

*Sharon L. Shuman*  
 CLERK OF THE COURT

DISTRICT COURT  
 CLARK COUNTY NEVADA

Shannon Carter,

Case No. A-16-747779-C  
 DEPT NO. II

Plaintiff

MEMORANDUM OF LAW IN SUPPORT OF PLAINTIFFS'

V

MOTION FOR A TEMPORARY RESTRAINING ORDER

James Dzurenda et al.,

AND PRELIMINARY INJUNCTION

Defendant

## STATEMENT OF THE CASE

This is a civil Rights action brought under 42 U.S.C. 1983 by a State Prisoner who is presently being denied medical care by H.D.S.P Dental program. The Plaintiff seeks a temporary restraining order a Preliminary Injunction to ensure he receives adequate medical care specifically pertaining to the infected tooth that has been left in Plaintiff's mouth by defendant's for over a year resulting in permanent damage to teeth Chipping lost of sleep and ability to eat and unnecessary wanton infliction of Pain.

## STATEMENT OF FACTS

As stated in the declaration submitted with this motion, Plaintiff is being denied medical care by the deliberate and indifferent acts of H.D.S.P Dental Program leaving an infected tooth in Plaintiff's mouth for over a year resulting in sever Pain, Chipping tooth, Swelling Bleeding gums and unnecessary wanton infliction of Pain despite the A.G.'s office Placing me on dental sick list to be treated.

JUN 05 2017

CLERK OF THE COURT

multiple kites, grievances and this low suit of informing H D S P Dental of my decreasing health H D S P still refuse to treat my infected tooth Putting me at great risk.

## Argument.

The Plaintiff is entitled to a temporary restraining order and Preliminary Injunction. In determining whether a Party is entitled to a (TRO) or Preliminary Injunction, courts generally consider several factors: Whether the Party will suffer irreparable injury, The Balance of hardship Between Parties, the likelihood of success on the merits and the Public interest each of these factors favors the grant of this motion.

A. The Plaintiff is threatened with Irreparable harm. Plaintiff is being denied medical care by H D S P dental Programs deliberate and Indifferent actions of leaving infected teeth in Plaintiffs mouth for over a year and refusing to treat resulting in permanent damage chipping, rotting and decaying tooth in Plaintiffs mouth.

As a matter of law, the continued deprivation of constitutional rights constitutes Irreparable harm *Elrod v Burns*, 427 US 347, 373, 96 S. CT 2673. *American Trucking Associations Inc. v City of Los Angeles* 559 F.3d 1046, 1058-59 (9<sup>th</sup> Cir 2009) This Principle has been applied in Prison litigation generally, see *Jolly v Coughlin*, 76 F.3d 468, 482 also *Newsom v Morris*, 888 F.2d 371 *Mitchell v Cumo* 748 F.2d 884, 806 *McClendon v City of Albuquerque*, 272 F. Supp 2d 1250, 1259 (D.N.M. 2003)

## B. The Balance of Hardships Favors the Plaintiff

In deciding whether to grant (TRO's) and Preliminary Injunctions, courts ask whether ~~the~~ the suffering of the moving Party if the motion is denied will out weigh the suffering of the non-moving Party if the motion is granted. see. *E.G Mitchell V Cuno*, 748 F.2d 804, 808 (Holding that Pased by Prison overcrowding outweighed State Financial and administrative concerns) *Duran V Anaya*, 642 F Supp 510, 527 (D.N.M.) (Holding that Prisoners interest in Safety and medical care outweigh State interest in Saving money by cutting staff)

In this case, the present suffering of Plaintiff and the Potential Suffering if forced to remain under the care of H D S P Dental Program, are enormous and almost unimaginable. The suffering the defendants will experience if the court grants the order will consist of:

1.) Placing one more medium custody inmate on the weekly transfer to a medium yard.

2.) Providing inmates with Constitutionally adequate medical care specifically, dental.

This is well within the defendants normal duties, things they do on a daily basis. The defendants hardship amounts to no more than business as usual.

1 C. The Plaintiff is likely to succeed on the merits.

2 The Plaintiff has a great likelihood to succeed on the merits  
 3 what the defendants have done "Intentionally" Leaving an infected  
 4 tooth in Plaintiff's mouth for over a year despite multiple Kites,  
 5 grievances, civil law suit and A.G.'s office Placing Plaintiff on dental  
 6 sick call list refused to treat Plaintiff. Moreover, The defendants  
 7 new Plaintiff was "suffering" bleeding gums, Chipping teeth, Sever Pain  
 8 lost of Sleep and ability to eat through grievances, Kites, and  
 9 law Suit. *Fields V Gander*, 734 F.2d 1313, 1315 (8th Cir 1984)  
 10 (Holding three week delay in treatment of a Painful condition stated  
 11 a claim) *Dean V Coughlin*, 623 F. Supp. at 404 (dental conditions are  
 12 serious if they "cause Pain discomfort or threat to good health")  
 13 *Tillery V Owens*, 719 F. Supp. 1256, 1309 (Holding dental care delays  
 14 of up to a year condemned)

15 In this case it is clear that H D S P dentals actions  
 16 were and are "Intentional" acts, in accordance with their Practices and  
 17 Policies. See *Simkins V Bruce*, 406 F.3d 1239, 1242-43 (10<sup>th</sup> Cir. 2005)  
 18 (Mailroom Supervisors statement that she acted consistently with her training  
 19 showed intentional action; Negligence would not be Sufficient, and  
 20 malice not required.)

21 D. The relief Sought will Serve the Public Interest

22 In this case, the grant of relief will serve the Public interest because it is  
 23 always in the Public's interest for Prison officials to obey the law, especially, the  
 24 constitution. *Phelps-Roper V Nixon*, 545 F.3d 685, 690 (3<sup>rd</sup> Cir. 2008)  
 25 *Duran V Anaya*, 642 F. Supp. 510, 527 (D.N.M.) (Respect for law, Particularly  
 26 by officials responsible for administration of the ~~prison~~ State Correctional  
 27 System, is in itself a matter of the highest Public interest.) *Lewelyn V Oakland*,  
 28 402 F. Supp. 1379, 2393 (Stating the Constitution is the ultimate expression of the Public interest)

## Point. II

The Plaintiff Should not be required to Post Security usually a litigant who obtains interim injunctive relief is asked to Post Security Rule 65(C) NRE. However the Plaintiff is an indigent Prisoner and is unable to Post Security. The court has discretion to excuse an impoverished litigant from posting Security. *Elliott V Kieseewetter*, 98 F.3d 47, 60 (3d Cir 1996) (Stating that district courts have discretion to waive the bond requirement contained in Rule 65. if the balance of the equities weigh overwhelmingly in favor of the party seeking the injunction.) *Maltanov V Eagle-Pitcher Industries, Inc.*, 55 F.3d 1171, 1176 (6<sup>th</sup> Cir. 1995) In view of the serious medical danger confronting the Plaintiff, the court should grant the relief requested without Posting Security.

## Conclusion.

For the reasons set forth in the instant motion and memorandum of law in support of Plaintiff's motion for temporary restraining order and Preliminary Injunction. Along with grievances, civil complaint and Plaintiff's medical records the facts of this case it would be in the interest of justice and judicial efficiency to grant Plaintiff's Temporary restraining order and Preliminary Injunction to correct an on going constitutional violation.

Date this 31 day of May, 2017

Respectfully Submitted  
Shannon Carter

Shannon Carter # 70773  
PO Box 650  
Indian Springs NV. 89070



Attachment (E)

(E)

Attachment (E)

**RELEASE OF LIABILITY FOR REFUSAL OF HEALTH CARE TREATMENT**

The undersigned inmate refuses recommended/scheduled healthcare treatment provided by NDOC at this time. Refusing does not necessarily waive his/her right to subsequent health care. Inmate has the right to accept or refuse health care offered at a later date. DOC 2525 Directive to Physicians or other valid declaration shall be honored.

The health care treatment listed below were refused at this time:

Check all that apply

- ☐ Infirmary Appointment for: \_\_\_\_\_
- ☐ Dental Appointment for: \_\_\_\_\_
- ☐ Psychiatry/Psychology Appointment for: \_\_\_\_\_
- ☐ Physical Therapist Appointment for: \_\_\_\_\_
- ☐ Optometrist Appointment for: \_\_\_\_\_
- ☐ Medication (List) \_\_\_\_\_
- ☐ Chronic Care Clinic for: \_\_\_\_\_
- ☐ OSHA Protocol for TB/Bloodborne Pathogens: \_\_\_\_\_
- ☐ Other Describe: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

I hereby release the Nevada Department of Corrections from any and all liability and responsibility that might result from my refusal of examination, treatment or testing described above; and further release any and all personnel from any and all liability and/or responsibility that might be incurred.

☐ **INMATE HAS BEEN INFORMED OF THE POTENTIAL ADVERSE MEDICAL CONSEQUENCES OF REFUSAL.**

I CERTIFY, I have read or had read to me the contents of this form. This release has been signed under no duress and with full understanding of possible hazards which may occur due to refusal.

I further understand that I may be subject to disciplinary action up to and including being financially responsible for all expenses related to this refusal.

INMATE/STAFF SIGNATURE \_\_\_\_\_

ID# \_\_\_\_\_

DATE \_\_\_\_\_

HEALTH STAFF WITNESS \_\_\_\_\_

DATE \_\_\_\_\_

HEALTH STAFF WITNESS ( If second witness necessary ) \_\_\_\_\_

DATE \_\_\_\_\_

NEVADA DEPARTMENT OF CORRECTIONS  
**RELEASE OF LIABILITY FOR  
REFUSAL OF HEALTH CARE  
TREATMENT**

NAME: \_\_\_\_\_

Last

First

MI

ID# \_\_\_\_\_

INSTITUTION: \_\_\_\_\_

Attachment (F)

(F)

Attachment (F)

1 DECL  
ADAM PAUL LAXALT  
2 Nevada Attorney General  
BARRACK T POTTER (Bar No. 14105)  
3 Deputy Attorney General  
State of Nevada  
4 Office of the Attorney General  
555 E. Washington Ave., Ste. 3900  
5 Las Vegas, NV 89101  
Telephone: (702) 486-3120  
6 Facsimile: (702) 486-3773  
E-Mail: bpotter@ag.nv.gov  
7

*Attorneys for Defendants  
8 State of Nevada, James  
Dzurenda, Scherrie Bean,  
9 and Ronrico Mangapit*

10 DISTRICT COURT  
11 CLARK COUNTY, NEVADA  
12

13 SHANNON CARTER,

14 Plaintiff,

15 v.

16 JOHN DOE HDSP DENTIST, et al.,

17 Defendants.  
18

Case No. A-16-747779-C  
Dept. No. II

**DECLARATION OF DOCTOR  
PAUL BITAR**

19 I, Dr. Paul Bitar, hereby declare based on personal knowledge, that the following  
20 assertions are true:

21 1. I am currently employed by the Nevada Department of Corrections as the  
22 Senior Institutional Dentist.

23 2. I am familiar with Plaintiff, Shannon Carter, inmate number 70773.

24 3. Plaintiff was scheduled for treatment on February 1, 2017; however, when  
25 Plaintiff came in for his treatment, he stated that he did not have any current dental  
26 treatment needs.

27 4. Plaintiff claimed that the only reason he scheduled the appointment was to  
28 get the names of dental assistants and providers to use in his litigation.

1           5.     Plaintiff has been seen multiple times by this office over the last fourteen  
2 months and was recently treated by Dr. Mangapit.

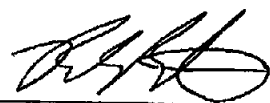
3           6.     Specifically, based on Plaintiff's medical records, on June 16, 2016, Plaintiff  
4 was evaluated, examined, and given the necessary dental treatment (fillings) by Dr.  
5 Mangapit.

6           7.     Additionally, several x-rays were performed and Plaintiff was advised if any  
7 other symptoms develop, submit a kite and Plaintiff will be scheduled accordingly.

8           8.     Plaintiff is claiming in his declaration that he is being outright denied dental  
9 care; however, based on Plaintiff's medical record and my personal experience, this  
10 assertion is completely incorrect.

11           Pursuant to NRS 53.045, I declare under penalty of perjury that the foregoing is  
12 true and correct.

13           EXECUTED this 27th day of June, 2017.

14   
15 \_\_\_\_\_  
16 Dr. Paul Bitar  
17  
18  
19  
20  
21  
22  
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27  
28

Attachment (G)

(G)

Attachment (G)

- A-16-747779-C

**DISTRICT COURT  
CLARK COUNTY, NEVADA**

**Other Civil Matters**

**COURT MINUTES**

**July 11, 2017**

---

A-16-747779-C      Shannon Carter, Plaintiff(s)  
vs.  
John Doe HDSP Dentist, Defendant(s)

---

**July 11, 2017      9:00 AM      Motion**

**HEARD BY:** Scotti, Richard F.

**COURTROOM:** RJC Courtroom 11D

**COURT CLERK:** Cassidy Wagner

**RECORDER:** Dalayne Easley

**REPORTER:**

**PARTIES**

<b>PRESENT:</b>	Carter, Shannon	Plaintiff
	Haar, Theresa M.	Attorney for Deft.
	Nevada State of	Defendant
	Potter, Barrack T.	Attorney for Deft.

**JOURNAL ENTRIES**

- Plaintiff Shannon Carter Sworn and Testified. Dr. Paul Bitar Sworn and Testified. Ms. Haar argued that Mr. Carter did not seek treatment and there was no indifferent treatment and does not meet the burden of establishing a likelihood of success on the merits and a reasonable probability that the non-moving party's conduct if allowed to continued would cause Plaintiff irreparable harm. COURT STATED IT'S FINDINGS AND ORDERED, Plaintiff's Motion for a Temporary Restraining Order and Preliminary Injunction DENIED. Mr. Potter to prepare the Order.

NDC

CLERK'S NOTE: The above minute order has been mailed to:

Shannon Carter#70773  
High Desert State Prison  
P.O. Box 650

PRINT DATE: 07/18/2017

Page 1 of 2

Minutes Date: July 11, 2017

Attachment (H)

(H)

Attachment (H)



Possible legal Documents  
Please Return for my  
Records  
Case Nu# A-16-747779-C

## INMATE REQUEST FORM

1.) INMATE NAME	DOC #	2.) HOUSING UNIT	3.) DATE
Shannon Carter	70773	8 <sup>C</sup> /4	7-16-17

4.) REQUEST FORM TO: (CHECK BOX)

<input type="checkbox"/> CASEWORKER	<input type="checkbox"/> MEDICAL	<input type="checkbox"/> MENTAL HEALTH	<input type="checkbox"/> CANTEEN
<input type="checkbox"/> EDUCATION	<input type="checkbox"/> VISITING	<input type="checkbox"/> LAW LIBRARY	<input type="checkbox"/> DENTAL
<input type="checkbox"/> LAUNDRY	<input type="checkbox"/> PROPERTY ROOM	<input checked="" type="checkbox"/> OTHER <u>Warden</u>	

5.) NAME OF INDIVIDUAL TO CONTACT: B. William Warden

6.) REQUEST: (PRINT BELOW) I would like to Personally inform you I am being denied Dental care here at high Desert state Prison, On 7-13-17 I went to court your head dentist was there I informed the court and the dentist I was in Pain and needed to be treated. 4:29:16 (HOSP) dental determined I have (3) teeth that warranted treatment #18 #19 #31, #18 and #19 were treated #31 was not I have informed dental via grievances, civil complaint, Dental sick call, and a court hearing. That I was in pain and need to be treated I am in pain and have been for over a year cant sleep, eat Pain (9) out of (10) Please help.

7.) INMATE SIGNATURE Shannon Carter DOC # 70773

8.) RECEIVING STAFF SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

## 9.) RESPONSE TO INMATE

HIGH DESERT STATE PRISON  
16 2017

I am in receipt of your letter and medical will be in contact to schedule you an appointment

10.) RESPONDING STAFF SIGNATURE B. William Warden DATE 7-17-17

Attachment (I)

(I)

Attachment (I)

**OFFICE OF THE SHERIFF  
CLARK COUNTY DETENTION  
CIVIL PROCESS SECTION**

SHANNON CARTER

**PLAINTIFF**

Vs

S BEAN - DENTAL ASSISTANT, HDSP

**DEFENDANT**

CASE No. A-16-747779-C  
SHERIFF CIVIL NO.: 17000481

**AFFIDAVIT OF SERVICE**

STATE OF NEVADA }

} ss:

COUNTY OF CLARK }

NICK TOSCANO, being first duly sworn, deposes and says: That he/she is, and was at all times hereinafter mentioned, a duly appointed, qualified and acting Deputy Sheriff in and for the County of Clark, State of Nevada, a citizen of the United States, over the age of twenty-one years and not a party to, nor interested in, the above entitled action; that on 1/31/2017, at the hour of 1:30 PM, affiant as such Deputy Sheriff served a copy/copies of **SUMMONS and CIVIL RIGHTS COMPLAINT** issued in the above entitled action upon the defendant **S BEAN - DENTAL ASSISTANT, HDSP** named therein, by delivering to and leaving with Human Resources Administrator **KATIE GUTIERREZ** for defendant **S BEAN - DENTAL ASSISTANT, HDSP** at **NDOC-ADMIN OFFICE, 3955 W RUSSELL ROAD, LAS VEGAS, NV 89118** within the County of Clark, State of Nevada, said copy/copies of **SUMMONS and CIVIL RIGHTS COMPLAINT**

*I, DECLARE UNDER PENALTY OF PERJURY UNDER THE LAW OF THE STATE OF NEVADA THAT THE FOREGOING IS TRUE AND CORRECT.*

**DATED February 1, 2017.**

\*OWF\*

Joseph M. Lombardo, Sheriff

By: Nick Tancor 9539  
NICK TOSCANO  
Deputy Sheriff

Attachment (J)

(J)

Attachment (J)

**OFFICE OF THE SHERIFF  
CLARK COUNTY DETENTION  
CIVIL PROCESS SECTION**

**FILED**

**MAY 26 2017**

*John J. Lombardo*  
CLERK OF COURT

SHANNON CARTER )

PLAINTIFF )

Vs )

MANGA PITT )

DEFENDANT )

CASE No. A16-747779-C  
SHERIFF CIVIL NO.: 17002480

**AFFIDAVIT OF SERVICE**

STATE OF NEVADA }  
                                  } ss:  
COUNTY OF CLARK }

NICK TOSCANO, being first duly sworn, deposes and says: That he is, and was at all times hereinafter mentioned, a duly appointed, qualified and acting Deputy Sheriff in and for the County of Clark, State of Nevada, a citizen of the United States, over the age of twenty-one years and not a party to, nor interested in, the above entitled action; that on 4/7/2017, at the hour of 10:10 AM. affiant as such Deputy Sheriff served a copy of **SUMMONS AND AMENDED CIVIL RIGHTS COMPLAINT** issued in the above entitled action upon the defendant **MANGA PITT** named therein, by delivering to and leaving with **KATIE GUTIERREZ**, (H.R. ASSISTANT ADMINISTRATOR) at **NDOC 3905 WEST RUSSELL ROAD LAS VEGAS, NV 89118** within the County of Clark, State of Nevada, a copy of **SUMMONS AND AMENDED CIVIL RIGHTS COMPLAINT**.

*I, DECLARE UNDER PENALTY OF PERJURY UNDER THE LAW OF THE STATE OF NEVADA THAT THE FOREGOING IS TRUE AND CORRECT.*

**DATED APRIL 10, 2017**

Joseph M. Lombardo, Sheriff

By *John J. Lombardo* *NICK TOSCANO*  
NICK TOSCANO  
Deputy Sheriff

**OFFICE OF THE SHERIFF  
CLARK COUNTY DETENTION  
CIVIL PROCESS SECTION**

**FILED**

MAY 26 1964

SHANNON CARTER

**PLAINTIFF**

$$V_S$$

S BEAN - DENTAL ASSISTANT, HDSP

**DEFENDANT**

*John J. Johnson*  
CLERK OF COURT

CASE No. A-16-747779-C  
SHERIFF CIVIL NO.: 17002477

## AFFIDAVIT OF SERVICE

STATE OF NEVADA }  
 } ss:  
COUNTY OF CLARK }

NICK TOSCANO, being first duly sworn, deposes and says: That he is, and was at all times hereinafter mentioned, a duly appointed, qualified and acting Deputy Sheriff in and for the County of Clark, State of Nevada, a citizen of the United States, over the age of twenty-one years and not a party to, nor interested in, the above entitled action; that on 4/7/2017, at the hour of 10:10 AM. affiant as such Deputy Sheriff served a copy of SUMMONS AND AMENDED CIVIL RIGHTS COMPLAINT issued in the above entitled action upon the defendant S BEAN - DENTAL ASSISTANT, HDSP named therein, by delivering to and leaving with KATIE GUTIERREZ, (H.R. ASSISTANT ADMINISTRATOR) at NDOC-ADMIN OFFICE 3955 W RUSSELL ROAD LAS VEGAS, NV 89118 within the County of Clark, State of Nevada, a copy of SUMMONS AND AMENDED CIVIL RIGHTS COMPLAINT.

I, DECLARE UNDER PENALTY OF PERJURY UNDER THE LAW OF THE STATE OF NEVADA THAT THE FOREGOING IS TRUE AND CORRECT.

DATED APRIL 10, 2017

**Joseph M. Lombardo, Sheriff**

By: Nick Toscano  
NICK TOSCANO  
Deputy Sheriff

Attachment (k)

(K)

Attachment (k)

**FILED**

MAY 26 2017

**PROOF OF SERVICE**
  
CLERK OF COURT

<b>Court Date:</b>		<b>File No.</b> 0009968
<b>Court:</b>	DISTRICT COURT CLARK COUNTY, NEVADA	<b>Case No.</b> A16747779C
<b>Initiator:</b>	SHANNON CARTER # 70773	<b>Other:</b> DZURENDA, JAMES NDOC
<b>Address:</b>	PO BOX 650 INDIAN SPRINGS, NV 89070	<b>Address:</b> 5500 SNYDER AVE CARSON CITY, NV 89702
<b>Plaintiff:</b>	CARTER, SHANNON	<b>Defendant:</b> DZURENDA, JAMES
<b>Address:</b>	, 0	<b>Address:</b> , 0

- Documents Served:  
SUMMONS & COMPLAINT
- Service Attempts:

Date	Time	Address	Served
4/21/17	14:12	Address: 5500 SNYDER AVE	<input checked="" type="checkbox"/>
		Notes: _____	
		Address: _____	<input type="checkbox"/>
		Notes: _____	
		Address: _____	<input type="checkbox"/>
		Notes: _____	
- Party Served: NANCY SANDERS Title: AAII
- I served the party named in Item 3: TO AUTHORIZED INDIVIDUAL
- Remarks: \_\_\_\_\_
- At the time of service I was at least 18 years of age and not a party to this action.
- I am an authorized individual with the Carson City Sheriff's Office and certify that the foregoing is true and correct.

DOUG STRENGE V199  
Carson City Sheriff's Office  
911 East Musser Street  
Carson City, NV 89701  
Phone: 775-887-2500

4/28/17  
Date